

## CERTIFICATE OF MAILING

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**Assistant Commissioner for Patents  
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on 1-18-02

Holli Glossop  
Holli Glossop

In Re Application Of: Haines et al.

Group No.: 2166

Serial No.: 09/917,359

Docket No. 050320-1040

Filed: July 27, 2001

**For: SYSTEM AND METHOD FOR PROVIDING MEDICAL CARE VIA A VIRTUAL  
CALL CENTER**

The following is a list of documents enclosed:

Return Postcard

Amendment, Petition and Fee to Delete and/or Add to Original Erroneously Named or not  
named Inventor in Declaration-Nonprovisional Application

Assent of Assignee to Correction

Statement of Non-Deceptive Intent by Person Being Added

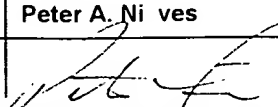
Check in the amount of \$130.00

Copy of Previously Filed Declaration

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any  
additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit  
Account No. 20-0778.

<div style="text-align: center;"> <b>FREE TRANSMITTAL</b>  <b>for FY 2002</b> </div> <p>Patent fees are subject to annual revision.</p>	<div style="text-align: right;">Complete If Known</div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>09/917,359</td> </tr> <tr> <td>Filing Date</td> <td>July 27, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Haines et al.</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group / Art Unit</td> <td>2166</td> </tr> <tr> <td>Attorney Docket No.</td> <td>050320-1040</td> </tr> </table>	Application Number	09/917,359	Filing Date	July 27, 2001	First Named Inventor	Haines et al.	Examiner Name		Group / Art Unit	2166	Attorney Docket No.	050320-1040
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<b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) <b>130.00</b>													

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																																																																					
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge to the following Deposit Account,</p> <p>Deposit Account Number: <b>20-0778</b></p> <p>Deposit Account Name: <b>Thomas, Kayden, Horstemeyer Risley</b></p> <p><input checked="" type="checkbox"/> Charge any additional fee required and requested to credit any overpayment.</p> <p><input type="checkbox"/> Charge all indicated fees and any additional fee required or credit any overpayment. Charge any additional fee required and requested to credit any overpayment.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit Card <input type="checkbox"/> Other</p>	<p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65</td> <td>Surcharge - late filing fee</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25</td> <td>Surcharge - late provisional filing fee cover sheet.</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520</td> <td>For filing a request for reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200</td> <td>Extension of time within second month</td> <td></td> </tr> <tr> <td>117</td> <td>920</td> <td>217</td> <td>460</td> <td>Extension of time within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720</td> <td>Extension of time within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980</td> <td>Extension of time within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55</td> <td>Petition to revive - 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SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	<b>Peter A. Ni ves</b>	Registration No.	<b>48,173</b>
Signature		Telephone Number	<b>770-933-9500</b>
		Date	<b>1 7 02</b>
		Deposit Account User ID	

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